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<p><i>Effective on 12/08/2004.</i></p> <p>Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).</p> <h1 style="text-align: center;"><b>FEE TRANSMITTAL</b></h1> <h2 style="text-align: center;"><b>For FY 2009</b></h2>		<b>Complete if Known</b>	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/582,903
		Filing Date	November 17, 2006
		First Named Inventor	Josef POZIVIL
		Examiner Name	Amene Setegne Bayou
		Art Unit	3746
		Attorney Docket No.	M03B334
<b>TOTAL AMOUNT OF PAYMENT</b>	<b>(\\$)</b>	180.00	

**METHOD OF PAYMENT** (check all that apply)

Check  Credit Card  Money Order  None  Other (please identify): \_\_\_\_\_  
 Deposit Account - Business Account Number: 82-28265

For the above-identified deposit account, the Banker is hereby authorized to collect all the amounts due

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

Charge fee(s) indicated below

Charge any additional fee(s) or underpayments of fee(s)  Credit any overpayments

Charge any additional fee(s) or underpayments of 100(g)  
 under 37 CFR 1.16 and 1.17  Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

## **FEE CALCULATION**

#### **1. BASIC FILING, SEARCH, AND EXAMINATION FEES**

<u>Application Type</u>	FILING FEES		SEARCH FEES		EXAMINATION FEES		<u>Fees Paid (\$)</u>
	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	<u>Small Entity</u>	<u>Fee (\$)</u>	
Utility	330	165	540	270	220	110	
Design	220	110	100	50	140	70	
Plant	220	110	330	165	170	85	
Reissue	330	165	540	270	650	325	
Provisional	220	110	0	0	0	0	

### **3 EXCESS CLAIM FEES**

**2. EXCESS CLAIMS  
Fee Description**

Each claim over 20 (including Reissues)

Each independent claim over 3 (including Reissues)

### **Multiple dependent claims**

<b>Total Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>	<b>Multiple Dependent Claims</b>	
- 20 or HP =	x	=		<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>
HP = highest number of total claims paid for, if greater than 20.					
<b>Indep. Claims</b>	<b>Extra Claims</b>	<b>Fee (\$)</b>	<b>Fee Paid (\$)</b>		

- 3 or HP =                  x                  =                 

HP = highest number of independent claims paid for, if greater than 3.

### **3 APPLICATION SIZE FEE**

**5. APPLICATION SIZE FEE** If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$270 (\$135 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets      Extra Sheets      Number of each additional 50 or fraction thereof      Fee (\$)      Fee Paid (\$)

- 100 =      / 50 =      (round up to a whole number) x      =

**4. OTHER FEE(S)**

Non-English Specification: \$130 fee (no small entity discount)

Other (e.g., late filing surcharge): Suppl. IDS - \$180.00

**Face Paint (\$)**

**\$180.00**

SUBMITTED BY

SUBMITTED BY			
Signature	/Joshua L. Cohen/	Registration No. (Attorney/Agent) 34,307	Telephone 908-771-6167
Name (Print/Type)	Joshua L. Cohen		Date May 6, 2009

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.